



**BWXT Y-12, L.L.C. SUBCONTRACTOR-HELD PROPERTY MANAGEMENT  
LOST PROPERTY FORM**

**BWXT Y-12, L.L.C. Subcontract Property**

**Attn: Barbara Hatfield**

**P.O. Box 2009**

**Oak Ridge, TN 37831-8043**

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NAME OF SUBCONTRACTOR	COMPLETED BY (PRINT NAME AND TITLE)
SUBCONTRACT NO.	DATE COMPLETED

**Instructions:** Complete and submit (1) Property loss Form (UCN-21044) and (2) Transmittal Form (UCN-21042) to: **BWXT Y-12, L.L.C. Subcontract Property.**

Property Item Attributes	
Your Property No.	
BWXT Property No.	
Description	
Manufacturer	
Model No.	
Serial No.	
Acquisition Date	
Acquisition Cost	
Condition	
Location	



Yes	No	Have you completed the following:
		1. Questioned all employees working in the vicinity of the lost property?
		2. Questioned employees who may have used the property in another location?
		3. Searched offices and storage areas in the vicinity?
		4. Searched shipping docks in the vicinity?

5. Briefly explain the circumstances of how and when the property was lost.



6. Do you feel this loss reflects the effectiveness of your Property Management System?

☐ YES ☐ NO

If yes, please state remedy(ies) and expected completion date for remedy(ies) to be implemented.

